

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

<b>EPA</b> United States Environmental Protection Agency Washington, DC 20460	<b>Notification of Hazardous Waste Activity</b>
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Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

**For Official Use Only**

Comments												
C												
C												
Installation's EPA ID Number								Approved	Date Received (yr. mo. day)			
C	PAD981114325							T/A	C			Bucks 017
F								1				

**I. Name of Installation**

SEARS ROEBUCK & CO

**II. Installation Mailing Address**

Street or P.O. Box

100 NESHAMINY MALL

City or Town

CORNWALLS HT

State

PA

ZIP Code

19020

**III. Location of Installation**

Street or Route Number

100 NESHAMINY MALL

City or Town

CORNWALLS HT

State

PA

ZIP Code

19020

**IV. Installation Contact**

Name and Title (last, first, and job title)

DAVID KELLY MANAGER

Phone Number (area code and number)

215 831 4000

**V. Ownership**

A. Name of Installation's Legal Owner

SEARS ROEBUCK

B. Type of Ownership (enter code)

**VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)**

<b>A. Hazardous Waste Activity</b> <input checked="" type="checkbox"/> 1a. Generator <input type="checkbox"/> 2. Transporter <input type="checkbox"/> 3. Treater/Storer/Disposer <input type="checkbox"/> 4. Underground Injection <input type="checkbox"/> 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below) <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner <input checked="" type="checkbox"/> 1b. Less than 1,000 kg/mo.	<b>B. Used Oil Fuel Activities</b> <input type="checkbox"/> 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below) <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner <input type="checkbox"/> 7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification
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**VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)**

☐ A. Utility Boiler    ☐ B. Industrial Boiler    ☐ C. Industrial Furnace

**VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))**

☐ A. Air    ☐ B. Rail    ☐ C. Highway    ☐ D. Water    ☐ E. Other (specify)

**IX. First or Subsequent Notification**

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☒ A. First Notification    ☐ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

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ID — For Official Use Only													
C												T/A	C
W													1

# X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1 F002	2 F004	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable (D001)

☐ 2. Corrosive (D002)

☐ 3. Reactive (D003)

☒ 4. Toxic (D000)

# XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

*[Signature]*

Name and Official Title (type or print)

HEAVY CENTER MANAGER

Date Signed

8-11-86

RECEIVED  
FACILITY

AUG 18 1986

EPA, R3



**ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY**  
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+ PAD981114325

KELLY, DAVID MGR

SEARS ROEBUCK & CO  
100 NESHAMINY MALL  
CORNWELLS HEIGHTS PA 19020

INSTALLATION ADDRESS

100 NESHAMINY MALL  
CORNWELLS HEIGHTS PA 19020